

Appendices for MH/DD/SAS Community Systems Progress Report

Third Quarter SFY 2007-2008 January 1 – March 31, 2008

Prepared by:

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Community Policy Management Section
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services

May 30, 2008



The following Appendices are a companion piece to the *Community Systems Progress Report*, both of which are available on the Division's website at: http://www.ncdhhs.gov/mhddsas/statspublications/reports. Appendix A lists the LME abbreviations used in the Report and their corresponding member counties as well as provides the population density of each county used to determine the Urban/ Mixed/ and Rural groupings, as referenced in the Report. Appendix B contains the tables with the statistics for each LME on the Progress Indicators addressed in the Report. Appendix C provides a summary sheet for each local system to use in comparing its performance to statewide averages and to other LMEs that are similar in population density. The formulas used for calculating each indicator are found in Appendix D.

	Habau**		esignation		ual**
Cumberland	Urban** 469	ACR Mixe	ea^	Albemarle Ru	ral**
umberiand	469 845	ACR Alamance	327	Camden	39
uilford	691	Caswell	56	Chowan	84
ecklenburg	1,559	Rockingham	162	Currituck	91
athways	1,000	BC	102	Dare	92
Cleveland	210	Burke	175	Hyde	9
Gaston	549	Catawba	377	Martin	47
Lincoln	237	Beacon Ctr	311	Pasquotank	175
ake	940	Edgecombe	104	Perquimans	50
ane	340	Greene	77	Tyrrell	11
		Nash	77 171	•	38
		Wilson	209	Washington Five County	30
		CenterPoint	203	Franklin	112
		Davie	150	Granville	102
		Forsyth	809	Halifax	77
		Stokes	103	Vance	173
			103	Warren	48
		Crossroads	249		40
		Iredell		Foothills	440
		Surry	138	Alexander	140
		Yadkin	113	Caldwell	167
		Eastpointe	0.4	McDowell	64
		Duplin	64	Johnston	191
		Lenoir	146	SER	
		Sampson	68	Bladen	38
		Wayne	211	Columbus	58
		ECBH		Robeson	136
		Beaufort	56	Scotland	116
		Bertie	28	SMountain	
		Craven	131	Alleghany	46
		Gates	33	Ashe	60
		Hertford	68	Avery	73
		Jones	22	Cherokee	58
		Northampton	40	Clay	47
		Pamlico	39	Graham	28
		Pitt	223	Haywood	103
		OC		Jackson	74
		Carteret	122	Macon	78
		Onslow	206	Swain	26
		OPC		Watauga	138
		Chatham	84	Wilkes	89
		Orange	310		
		Person	96		
		Piedmont			
		Cabarrus	423		
		Davidson	282		
		Rowan	263		
		Stanly	150		
		Union	264		
		Sandhills			
		Anson	49		
		Harnett	175		
		Hoke	108		
		Lee	213		
		Montgomery	56		
		Moore	118		
		Randolph	177		
		Richmond	99		
		SEC	00		
		Brunswick	108		
		New Hanover	931		
		Pender	55		
			ან		
		WHighlands	224		
		Buncombe	334		
		Henderson	266		
		Madison	69		
		Mitchell	72		
		Polk	81		
		Rutherford	113		
		Transylvania	80		
		Yancey	59		

^{*} Definition from N.C. Rural Economic Development Center's Rural Data Bank http://www.ncruralcenter.org/databank/ and population density is based on North Carolina State Demographics Unit July 2006 Population Projections (as of 12/6/06) and county area from the US Census Bureau 2006 Quick Facts (http://quickfacts.census.gov/qfd/states).

^{**} Urban counties have an average of 200 or more persons living per square mile of land area. The Mixed group contains multi-county LMEs with at least one member county meeting the definition of urban. Rural counties contain fewer than 200 persons per square mile.

Appendix B

	# Persons	Determine	ed To Need	Provided W	ithin 2 Hours		ailable But in 2 Hours*		Access Within 2 urs**
LME	Requesting Services	# Persons	% Persons Requesting Services	# Persons	% Persons Determined To Need	# Persons	% Persons Determined To Need	# Persons	% Persons Determined To Need
Cumberland	1,283	12	1%	11	92%	1	8%	12	100%
Durham	1,468	372	25%	372	100%	0	0%	372	100%
Guilford	2,966	1,051	35%	1,051	100%	0	0%	1,051	100%
Mecklenburg	1,490	302	20%	302	100%	0	0%	302	100%
Pathways	2,064	295	14%	242	82%	0	0%	242	82%
Wake	2,348	544	23%	544	100%	0	0%	544	100%
URBAN SUBTOTAL	11,619	2,576	22%	2,522	98%	1	0%	2,523	98%
ACR	1,388	124	9%	121	98%	3	2%	124	100%
BC	3,660	152	4%	136	89%	4	3%	140	92%
Beacon Ctr	1,256	44	4%	41	93%	3	7%	44	100%
CenterPoint	3,469	1,116	32%	1,114	100%	2	0%	1,116	100%
Crossroads	2,313	504	22%	504	100%	0	0%	504	100%
Eastpointe	1,281	76	6%	76	100%	0	0%	76	100%
ECBH	1,129	170	15%	170	100%	0	0%	170	100%
OC	942	209	22%	208	100%	1	0%	209	100%
OPC	1,261	259	21%	257	99%	1	0%	258	100%
Piedmont*									
Sandhills	2,998	548	18%	546	100%	2	0%	548	100%
SEC	2,537	137	5%	137	100%	0	0%	137	100%
WHighlands	2,181	446	20%	446	100%	0	0%	446	100%
MIXED SUBTOTAL	24,415	3,785	16%	3,756	99%	16	0%	3,772	100%
Albemarle	1.389	163	12%	143	88%	20	12%	163	100%
Five County	1,647	709	43%	709	100%	0	0%	709	100%
Foothills	2,662	295	11%	260	88%	35	12%	295	100%
Johnston	766	170	22%	170	100%	0	0%	170	100%
SER	2,255	142	6%	142	100%	0	0%	142	100%
SMountain	2,906	357	12%	298	83%	59	17%	357	100%
RURAL SUBTOTAL	11,625	1,836	16%	1,722	94%	114	6%	1,836	100%
	·							·	
STATEWIDE	47,659	8,197	17%	8,000	98%	131	2%	8,131	99%

^{**}Course: LME quarterly reports to DMH/DD/SAS. January 1 - March 31, 2008.

**Access Available But Not Seen" is defined as a qualified provider was on the physical premises ready to provide immediate care as soon as the consumer was available to receive care, but a face-to-face service was not provided within 2 hours of the request for services because the consumer was not available within this time frame to receive it.

**Total Provided Access Within 2 Hours' includes consumers provided emergency care plus consumers provided access but not seen within 2 hours of the request.

NOTE: Percentages should NOT total 100% across the LME row.

	# Persons	Determine	ed To Need	Provided Wi	thin 48 Hours	Offered Bu	t Declined*	Scheduled	- No Show
LME	Requesting Services	# Persons	% Persons Requesting Services	# Persons	% Persons Determined To Need	# Persons	% Persons Determined To Need	# Persons	% Persons Determined To Need
Cumberland	1,283	167	13%	114	68%	28	17%	25	15%
Durham	1,468	173	12%	126	73%	13	8%	29	17%
Guilford	2,966	81	3%	81	100%	0	0%		0%
Mecklenburg	1,490	607	41%	595	98%	0	0%	12	2%
Pathways	2,064	170	8%	91	54%	22	13%	37	22%
Wake	2,348	732	31%	692	95%	6	1%	34	5%
URBAN SUBTOTAL	11,619	1,930	17%	1,699	88%	69	4%	137	7%
ACR	1,388	262	19%	262	100%	0	0%	0	0%
BC	3,660	46	1%	42	91%	2	4%	2	4%
Beacon Ctr	1,256	266	21%	112	42%	3	1%	60	23%
CenterPoint	3,469	259	7%	197	76%	0	0%	50	19%
Crossroads	2,313	127	5%	123	97%	0	0%	2	2%
Eastpointe	1,281	136	11%	123	90%	0	0%	13	10%
ECBH	1,129	153	14%	70	46%	49	32%	34	22%
OC	942	173	18%	119	69%	20	12%	16	9%
OPC	1,261	251	20%	215	86%	2	1%	21	8%
Piedmont*									
Sandhills	2,998	512	17%	444	87%	33	6%	35	7%
SEC	2,537	589	23%	425	72%	61	10%	67	11%
WHighlands	2,181	168	8%	123	73%	9	5%	36	21%
MIXED SUBTOTAL	24,415	2,942	12%	2,255	77%	179	6%	336	11%
Albemarle	1.389	145	10%	112	77%	19	13%	14	10%
Five County	1,647	38	2%	38	100%	0	0%	0	0%
Foothills	2,662	53	2%	26	49%	22	42%	5	9%
Johnston	766	63	8%	62	98%	0	0%	0	0%
SER	2,255	200	9%	172	86%	13	7%	15	8%
SMountain	2,906	579	20%	345	60%	0	0%	107	18%
RURAL SUBTOTAL	11,625	1,078	9%	755	70%	54	5%	141	13%
STATEWIDE	47.659	5.950	12%	4.709	79%	302	5%	614	10%

SOURCE: LME quarterly reports to DMH/DD/SAS. January 1 - March 31, 2008.

***Offered But Declined* includes consumers that were offered an appointment within the target time frame but declined for personal convenience or necessity and requested a later appointment or were scheduled for an appointment within the target time frame but called and rescheduled it to a later time.

NOTE: Percentages should NOT total 100% across the LME row.

	# Persons	Determine	d To Need	Provided Within	14 Calendar Days	Offered Bu	t Declined*	Scheduled	- No Show
LME	Requesting Services	# Persons	% Persons Requesting Services	# Persons	% Persons Determined To Need	# Persons	% Persons Determined To Need	# Persons	% Persons Determined To Need
Cumberland	1,283	767	60%	503	66%	116	15%	148	19%
Durham	1,468	923	63%	682	74%	126	14%	101	11%
Guilford	2,966	1,414	48%	1,181	84%	16	1%	217	15%
Mecklenburg	1,490	581	39%	384	66%	0	0%	191	33%
Pathways	2,064	1,374	67%	790	58%	34	2%	245	18%
Wake	2,348	1,072	46%	856	80%	207	19%	9	1%
URBAN SUBTOTAL	11,619	6,131	53%	4,396	72%	499	8%	911	15%
ACR	1,388	986	71%	256	26%	99	10%	286	29%
BC	3,660	1,863	51%	787	42%	134	7%	242	13%
Beacon Ctr	1,256	925	74%	506	55%	15	2%	323	35%
CenterPoint	3,469	2,061	59%	937	46%	13	1%	479	23%
Crossroads	2,313	1,476	64%	832	56%	39	3%	133	9%
Eastpointe	1,281	1,067	83%	942	88%	0	0%	125	12%
ECBH	1,129	806	71%	402	50%	145	18%	259	32%
OC	942	560	59%	384	69%	35	6%	137	24%
OPC	1,261	649	51%	419	65%	38	6%	192	30%
Piedmont*									
Sandhills	2,998	1,076	36%	817	76%	121	11%	138	13%
SEC	2,537	1,230	48%	908	74%	63	5%	259	21%
WHighlands	2,181	1,547	71%	1,356	88%	16	1%	175	11%
MIXED SUBTOTAL	24,415	14,246	58%	8,546	60%	718	5%	2,748	19%
Albemarle	1.389	1.081	78%	463	43%	104	10%	14	1%
Five County	1,647	900	55%	665	74%	26	3%	67	7%
Foothills	2,662	2,314	87%	1,923	83%	235	10%	156	7%
Johnston	766	424	55%	255	60%	21	5%	148	35%
SER	2,255	798	35%	608	76%	90	11%	100	13%
SMountain	2,906	1,970	68%	1,411	72%	23	1%	433	22%
RURAL SUBTOTAL	11,625	7,487	64%	5,325	71%	499	7%	918	12%
STATEWIDE	47.659	27.864	58%	18,267	66%	1.716	6%	4.577	16%

SOURCE: LME quarterly reports to DMH/DD/SAS. January 1 - March 31, 2008.

*"Offered But Declined" includes consumers that were offered an appointment within the target time frame but declined for personal convenience or necessity and requested a later appointment or were scheduled for an appointment within the target time frame but called and rescheduled it to a later time.

NOTE: Percentages should NOT total 100% across the LME row.

		Adult MH			Adult DD			Adult SA	
LME	Number in Need	Number Served	Percent of Population in Need Served	Number in Need	Number Served	Percent of Population in Need Served	Number in Need	Number Served	Percent of Population in Need Served
Cumberland	12,192	5,269	43%	1,927	534	28%	21,262	1,375	6%
Durham	10,316	4,239	41%	1,598	594	37%	17,660	1,379	8%
Guilford	18,753	7,117	38%	2,777	1,023	37%	30,978	2,255	7%
Mecklenburg	34,365	7,686	22%	5,198	1,651	32%	56,226	3,852	7%
Pathways	15,209	9,438	62%	2,152	1,170	54%	24,154	2,578	11%
Wake	32,907	8,035	24%	5,032	1,187	24%	54,402	2,886	5%
URBAN SUBTOTAL	123,742	41,784	34%	18,684	6,159	33%	204,681	14,325	7%
ACR	10,631	4.440	42%	1.509	569	38%	17.047	1.213	7%
BC	9,971	4,393	44%	1,422	504	35%	15,977	1,390	9%
Beacon Ctr	9,918	3,636	37%	1,406	638	45%	15.824	712	4%
CenterPoint	17,359	6,608	38%	2,480	894	36%	27.829	2,358	8%
Crossroads	10,655	4,731	44%	1.498	523	35%	16,824	1,193	7%
Eastpointe	11,730	4,877	42%	1,684	831	49%	18,944	1,048	6%
ECBH	16,348	6,153	38%	2,409	1,115	46%	27,559	2,040	7%
OC	9,502	2,886	30%	1,605	358	22%	18,498	1,018	6%
OPC	9,464	2,528	27%	1,454	548	38%	16,421	1,072	7%
Piedmont*									
Sandhills	21,491	8,662	40%	3,077	1,018	33%	34,585	2,354	7%
SEC	14,568	5,313	36%	2,047	674	33%	23,367	2,057	9%
WHighlands	21,211	9,738	46%	2,867	1,325	46%	33,096	2,812	8%
MIXED SUBTOTAL	162,848	63,965	39%	23,457	8,997	38%	265,971	19,267	7%
Albemarle	7,762	3,646	47%	1,072	481	45%	12,280	1,128	9%
Five County	9,418	5,448	58%	1,336	594	44%	14,999	1,405	9%
Foothills	6,705	2,872	43%	933	328	35%	10,531	719	7%
Johnston	6,198	3,140	51%	912	214	23%	9,912	1,029	10%
SER	10,134	6,040	60%	1,460	792	54%	16,407	1,820	11%
SMountain	15,410	6,534	42%	2,153	816	38%	25,110	1,819	7%
RURAL SUBTOTAL	55,627	27,680	50%	7,867	3,225	41%	89,240	7,920	9%
STATEWIDE	342,218	133,429	39%	50.008	18.381	37%	559.892	41,512	7%

SOURCE: Medicaid and State Service Claims Data. January 1, 2007 to December 31, 2007.

* Data on service claims for Piedmont are not available for this report.

- Data Sources and Calculations for Prevalence:

 Population Data: State Demographics Unit (http://demog.state.nc.us), July 2007 Population Projection (last update 6/5/07), downloaded 10/31/07.

 Mental Health Prevalence Rates: Prepared by NRI/SDICC for CMHS, August 30, 2007 (for the MH Block Grant)

 Children: URS Table 1: Children with Serious Emotional Disturbance, ages 9-17, by State, 2006. Note: 12% is the midpoint (11%-13%) for the LOF=60 range (SED with substantial functional impairment). The same rate was applied to children under age 9.
- Impairment). The same rate was applied to funder under age 3.

 Adults: URS Table 1: Number of Persons with Serious Mental Illness, age 18 and older, by State, 2006.

 Substance Abuse Prevalence Rates: SAMHSA, Office of Applied Studies, National Surveys on Drug Use and Health, 2004 and 2005, published Feb 2007.

Children and Adults: Table B.20, Dependence on or Abuse of Illicit Drugs or Alcohol in Past Year, by Age Group and State: Percentages, Annual Averages Based on 2004 and 2005 NSDUH.

Prevalence rate for adolescents (ages 12-17) is 8.06%, for adults (ages 18-25) is 18.20%, and for adults (ages 26+) is 7.11%.

Pevelopmental Disability Prevalence Rates: Report by the US DHHS, Surgeon General (2001) based on data from the 1994 and 1995 National Health Interview Survey (NHIS) Disability Supplement,

Phase I, Estimated Ages of People with MR/DD in US Non-Institutional Population. Prevalence rates for persons ages 3-5 = 3.8%, ages 6-16 = 3.2%, ages 17-24 = 1.5%, ages 25-34 = 0.9%, ages 35-44 = 0.8%, ages 45-54 = 0.7%, ages 55-64 = 0.5%, ages 65+ = 0.4%.

Estimated Persons In Need Of Services: These numbers were calculated by multiplying the most current available statewide prevalence rates for NC for MH, DD, and SA by the July 2007 county

population projections for each relevant age group for each county in each LME's catchment area.

	_	hild/Adolescent N	ш		hild/Adolescent [ND.	Adolescent SA			
		illiu/Audiescellt iv			niid/Adolescent L			Addlescent SA		
LME	Manual and In Manual		Percent of	Manual and In Manual		Percent of	Manuals and Inc. Manual		Percent of	
	Number in Need	Number Served	Population in Need Served	Number in Need	Number Served	Population in Need Served	Number in Need	Number Served	Population in Need Served	
Overally and are d	8,220	3.588	Served 44%	2,194	350	16%	2,209	150	7%	
Cumberland	5,899	3,588	44% 65%		364	23%		150	10%	
Durham				1,585			1,501			
Guilford	11,095	4,080	37%	2,956	496	17%	3,027	156	5%	
Mecklenburg	21,660	6,508	30%	5,811	945	16%	5,608	293	5%	
Pathways	9,020	4,631	51%	2,402	736	31%	2,498	193	8%	
Wake	20,995	6,244	30%	5,624	737	13%	5,540	239	4%	
URBAN SUBTOTAL	76,889	28,912	38%	20,572	3,628	18%	20,383	1,181	6%	
100	0.111	0.004	000/	4.000	007	4.407	4.000	110	70/	
ACR	6,144	2,331	38%	1,639	227	14%	1,663	118	7%	
BC	5,974	2,773	46%	1,591	217	14%	1,643	122	7%	
Beacon Ctr	6,224	3,204	51%	1,659	348	21%	1,732	70	4%	
CenterPoint	10,458	4,127	39%	2,786	466	17%	2,866	243	8%	
Crossroads	6,607	1,800	27%	1,766	241	14%	1,772	104	6%	
Eastpointe	7,535	3,913	52%	2,012	475	24%	2,011	88	4%	
ECBH	9,083	6,953	77%	2,425	740	31%	2,479	207	8%	
OC	4,963	1,808	36%	1,332	212	16%	1,302	66	5%	
OPC	4,716	1,762	37%	1,259	327	26%	1,286	92	7%	
Piedmont*										
Sandhills	13,385	5,908	44%	3,568	584	16%	3,609	280	8%	
SEC	6,887	3,990	58%	1,835	617	34%	1,923	118	6%	
WHighlands	10,598	5,351	50%	2,825	673	24%	2,924	214	7%	
MIXED SUBTOTAL	92,574	43,920	47%	24,699	5,127	21%	25,214	1,722	7%	
Albemarle	4,086	2,351	58%	1,090	194	18%	1,135	56	5%	
Five County	5,742	2,960	52%	1,529	261	17%	1,607	135	8%	
Foothills	3,756	1,532	41%	1,002	123	12%	1,014	44	4%	
Johnston	4,161	1,450	35%	1,120	123	11%	1,048	39	4%	
SER	6,935	5,287	76%	1,850	590	32%	1,885	133	7%	
SMountain	7,013	4,045	58%	1,874	364	19%	1,901	132	7%	
RURAL SUBTOTAL	31,693	17,625	56%	8,466	1,655	20%	8,591	539	6%	

SOURCE: Medicaid and State Service Claims Data. January 1, 2007 to December 31, 2007.

- Data Sources and Calculations for Prevalence:

 Population Data: State Demographics Unit (http://demog.state.nc.us), July 2007 Population Projection (last update 6/5/07), downloaded 10/31/07.

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Phase I, Estimated Ages of People with MR/DD in US Non-Institutional Population. Prevalence rates for persons ages 3-5 = 3.8%, ages 6-16 = 3.2%, ages 17-24 = 1.5%, ages 25-34 = 0.9%, ages 35-44 = 0.8%, ages 45-54 = 0.7%, ages 55-64 = 0.5%, ages 65+ = 0.4%.

Estimated Persons In Need Of Services: These numbers were calculated by multiplying the most current available statewide prevalence rates for NC for MH, DD, and SA by the July 2007 county

population projections for each relevant age group for each county in each LME's catchment area.

^{*} Data on service claims for Piedmont are not available for this report.

INDICATOR 3: Timely Init			1						
	2 Visits with	hin 14 Days	2nd Servic	e > 14 Days	No 2nd	Service	Total Number	4 Visits with	nin 45 Days**
LME	Number	Percent	Number	Percent	Number	Percent	with an Initial Visit	Number	Percent
Cumberland	598	26%	529	23%	1,149	50%	2,276	374	16%
Durham	726	53%	305	22%	344	25%	1,375	547	40%
Guilford	887	33%	524	20%	1,274	47%	2,685	613	23%
Mecklenburg	1,170	49%	569	24%	642	27%	2,381	866	36%
Pathways	1,016	36%	874	31%	969	34%	2,859	694	24%
Wake	1,038	39%	787	30%	811	31%	2,636	757	29%
URBAN SUBTOTAL	5,435	38%	3,588	25%	5,189	37%	14,212	3,851	27%
40D	470	0.40/	044	050/	504	400/	4 404	010	000/
ACR	473	34%	344	25%	584	42%	1,401	316	23%
BC	583	34%	539	31%	611	35%	1,733	334	19%
Beacon Ctr	592	37%	499	31%	522	32%	1,613	411	25%
CenterPoint	824	34%	592	25%	981	41%	2,397	575	24%
Crossroads	548	34%	518	33%	524	33%	1,590	322	20%
Eastpointe	770	38%	532	26%	721	36%	2,023	493	24%
ECBH	1,262	48%	634	24%	758	29%	2,654	981	37%
OC	376	36%	323	31%	354	34%	1,053	219	21%
OPC	349	46%	176	23%	236	31%	761	224	29%
Piedmont*									
Sandhills	1,127	30%	931	25%	1,685	45%	3,743	697	19%
SEC	795	40%	461	23%	711	36%	1,967	560	28%
WHighlands	1,260	46%	727	27%	749	27%	2,736	837	31%
MIXED SUBTOTAL	8,959	38%	6,276	27%	8,436	36%	23,671	5,969	25%
Albemarle	530	36%	376	26%	552	38%	1.458	311	21%
Five County	569	29%	559	28%	845	43%	1,973	366	19%
Foothills	343	34%	312	31%	355	35%	1,010	167	17%
Johnston	292	24%	284	24%	620	52%	1,196	156	13%
SER	1,123	54%	475	23%	487	23%	2,085	872	42%
SMountain	795	36%	466	21%	950	43%	2,211	530	24%
RURAL SUBTOTAL	3,652	37%	2,472	25%	3,809	38%	9.933	2,402	24%
	-,	- 10	,	770	-,,,	70	.,,	,	= 1,0
STATEWIDE	18,046	38%	12,336	26%	17,434	36%	47,816	12,222	26%

SOURCE: Medicaid and State Service Claims Data. July 1 - September 30, 2007 (first service received)

* Data on service claims for Piedmont are not available for this report.

** For persons receiving 2 visits within the first 14 days of service.

NOTE: Percentages should NOT total 100% across the LME row.

INDICATOR 3: Timely Initia			1	•	1		1 1		
	2 Visits with	hin 14 Days	2nd Service	e > 14 Days	No 2nd	Service	Total Number	4 Visits with	nin 45 Days**
LME	Number	Percent	Number	Percent	Number	Percent	with an Initial Visit	Number	Percent
Cumberland	27	57%	6	13%	14	30%	47	22	47%
Durham	21	72%	1	3%	7	24%	29	17	59%
Guilford	38	64%	10	17%	11	19%	59	35	59%
Mecklenburg	51	66%	13	17%	13	17%	77	37	48%
Pathways	48	76%	4	6%	11	17%	63	42	67%
Wake	57	77%	10	14%	7	9%	74	49	66%
URBAN SUBTOTAL	242	69%	44	13%	63	18%	349	202	58%
			-		-				
ACR	21	68%	2	6%	8	26%	31	17	55%
BC	13	62%	6	29%	2	10%	21	7	33%
Beacon Ctr	24	59%	8	20%	9	22%	41	16	39%
CenterPoint	40	78%	8	16%	3	6%	51	36	71%
Crossroads	21	100%	0	0%	0	0%	21	21	100%
Eastpointe	25	58%	8	19%	10	23%	43	25	58%
ECBH	56	72%	12	15%	10	13%	78	49	63%
OC	17	65%	5	19%	4	15%	26	14	54%
OPC	40	85%	5	11%	2	4%	47	36	77%
Piedmont*									
Sandhills	28	61%	7	15%	11	24%	46	24	52%
SEC	41	77%	4	8%	8	15%	53	35	66%
WHighlands	43	65%	16	24%	7	11%	66	34	52%
MIXED SUBTOTAL	369	70%	81	15%	74	14%	524	314	60%
Albemarle	34	74%	9	20%	3	7%	46	33	72%
Five County	15	58%	5	19%	6	23%	26	10	38%
Foothills	13	87%	1	7%	1	7%	15	9	60%
Johnston	28	93%	1	3%	1	3%	30	26	87%
SER	11	39%	5	18%	12	43%	28	7	25%
SMountain	19	68%	1	4%	8	29%	28	12	43%
RURAL SUBTOTAL	120	69%	22	13%	31	18%	173	97	56%
STATEWIDE	731	70%	147	14%	168	16%	1,046	613	59%

^{**} For persons receiving 2 visits within the first 14 days of service.

NOTES: Percentages should NOT total 100% across the LME row.

This measures includes a low number of persons with dual DD/SA diagnoses.

INDICATOR 3: Timely Initia			1	•					
	2 Visits with	nin 14 Days	2nd Servic	e > 14 Days	No 2nd	Service	Total Number	4 Visits with	nin 45 Days**
LME	Number	Percent	Number	Percent	Number	Percent	with an Initial Visit	Number	Percent
Cumberland	108	63%	15	9%	49	28%	172	83	48%
Durham	108	82%	7	5%	17	13%	132	86	65%
Guilford	146	65%	23	10%	54	24%	223	109	49%
Mecklenburg	332	75%	32	7%	79	18%	443	275	62%
Pathways	150	66%	21	9%	57	25%	228	127	56%
Wake	199	57%	56	16%	96	27%	351	161	46%
URBAN SUBTOTAL	1,043	67%	154	10%	352	23%	1,549	841	54%
AOD	7.4	F70/	45	400/	44	000/	100		000/
ACR	74	57%	15	12%	41 27	32%	130	47	36%
BC Beacon Ctr	106	68%	22	14%	24	17%	155 87	94 37	61%
	58 216	67%	5	6%	66	28%			43%
CenterPoint		69%	33	10%		21%	315	185	59%
Crossroads	98	65%	18	12%	34	23%	150	72	48%
Eastpointe	57	54%	14	13%	35	33%	106	37	35%
ECBH	231	66%	55	16%	64	18%	350	172	49%
OC	140	54%	44	17%	77	30%	261	109	42%
OPC	110	76%	18	13%	16	11%	144	88	61%
Piedmont*									
Sandhills	166	59%	44	16%	71	25%	281	104	37%
SEC	141	62%	30	13%	56	25%	227	110	48%
WHighlands	207	75%	32	12%	37	13%	276	167	61%
MIXED SUBTOTAL	1,604	65%	330	13%	548	22%	2,482	1,222	49%
Albemarle	65	43%	19	13%	67	44%	151	47	31%
Five County	57	49%	23	20%	36	31%	116	42	36%
Foothills	62	77%	8	10%	11	14%	81	51	63%
Johnston	37	70%	5	9%	11	21%	53	31	58%
SER	121	70%	13	7%	40	23%	174	86	49%
SMountain	140	55%	20	8%	96	38%	256	108	42%
RURAL SUBTOTAL	482	58%	88	11%	261	31%	831	365	44%
STATEWIDE	3,129	64%	572	12%	1,161	24%	4,862	2,428	50%

SOURCE: Medicaid and State Service Claims Data. July 1 - September 30, 2007 (first service received)

* Data on service claims for Piedmont are not available for this report.

** For persons receiving 2 visits within the first 14 days of service.

NOTE: Percentages should NOT total 100% across the LME row.

	2 Visits wit	hin 14 Days	2nd Service	e > 14 Days	No 2nd	d Service	Total Number	4 Visits with	nin 45 Days**
LME	Number	Percent	Number	Percent	Number	Percent	with an Initial Visit	Number	Percent
Cumberland	19	39%	19	39%	11	22%	49	15	31%
Durham	20	59%	10	29%	4	12%	34	14	41%
Guilford	33	29%	18	16%	64	56%	115	21	18%
Mecklenburg	83	66%	30	24%	13	10%	126	64	51%
Pathways	38	64%	13	22%	8	14%	59	30	51%
Vake	26	67%	9	23%	4	10%	39	25	64%
JRBAN SUBTOTAL	219	52%	99	23%	104	25%	422	169	40%
ACR	20	65%	6	19%	5	16%	31	17	55%
BC	18	60%	6	20%	6	20%	30	15	50%
Beacon Ctr	17	49%	12	34%	6	17%	35	12	34%
CenterPoint	20	61%	11	33%	2	6%	33	18	55%
Prossroads	25	53%	13	28%	9	19%	47	22	47%
Eastpointe	30	56%	16	30%	8	15%	54	24	44%
ECBH	68	70%	18	19%	11	11%	97	57	59%
DC	12	63%	6	32%	1	5%	19	9	47%
DPC	15	65%	5	22%	3	13%	23	13	57%
Piedmont*	15	65%	5	2270	3	13%	23	13	37%
Sandhills	30	50%	16	27%	14	23%	60	27	45%
BEC	37	88%	3	7%	2	5%	42	31	74%
WHighlands	40	68%	17	29%	2	3%	59	31	53%
MIXED SUBTOTAL	332	63%	129	24%	69	13%	530	276	52%
Albemarle	21	49%	9	21%	13	30%	43	18	42%
ive County	15	34%	12	27%	17	39%	44	12	27%
oothills	8	62%	2	15%	3	23%	13	8	62%
lohnston	14	56%	6	24%	5	20%	25	11	44%
SER	44	64%	20	29%	5	7%	69	36	52%
SMountain	64	70%	16	18%	11	12%	91	59	65%
RURAL SUBTOTAL	166	58%	65	23%	54	19%	285	144	51%
STATEWIDE	717	58%	293	24%	227	18%	1.237	589	48%

^{**} SOURCE: Medicaid and State Service Claims Data. July 1 - September 30, 2007 (first service received)

* Data on service claims for Piedmont are not available for this report.

** For persons receiving 2 visits within the first 14 days of service.

NOTE: Percentages should NOT total 100% across the LME row.

	2 Visits wit	hin 14 Days	2nd Servic	e > 14 Days	No 2nd	d Service	Total Number	4 Visits with	in 45 Days**
LME	Number	Percent	Number	Percent	Number	Percent	with an Initial Visit	Number	Percent
Cumberland	98	39%	50	20%	102	41%	250	71	28%
Durham	111	57%	48	25%	35	18%	194	89	46%
Guilford	212	47%	82	18%	154	34%	448	147	33%
Mecklenburg	250	53%	93	20%	129	27%	472	207	44%
Pathways	205	69%	48	16%	46	15%	299	147	49%
Vake	201	44%	126	27%	132	29%	459	147	32%
JRBAN SUBTOTAL	1,077	51%	447	21%	598	28%	2,122	808	38%
ACR	87	52%	26	16%	53	32%	166	67	40%
BC	82	60%	34	25%	21	15%	137	59	43%
Beacon Ctr	56	63%	16	18%	17	19%	89	47	53%
CenterPoint	238	56%	89	21%	100	23%	427	188	44%
Prossroads	103	54%	44	23%	42	22%	189	66	35%
Eastpointe	87	49%	44	25%	48	27%	179	51	28%
ECBH	162	53%	65	21%	78	26%	305	116	38%
DC	43	66%	19	29%	3	5%	65	40	62%
OPC	81	67%	20	17%	20	17%	121	63	52%
Piedmont*	01	07 /6	20	17 /0	20	17 /0	121	03	32 /6
Sandhills	197	50%	94	24%	104	26%	395	137	35%
SEC	120	60%	23	11%	58	29%	201	78	39%
VHighlands	232	67%	70	20%	43	12%	345	185	54%
MIXED SUBTOTAL	1,488	57%	544	21%	587	22%	2,619	1,097	42%
Albemarle	102	48%	54	26%	55	26%	211	53	25%
Five County	117	43%	74	27%	82	30%	273	84	31%
oothills	64	57%	32	28%	17	15%	113	50	44%
Iohnston	100	34%	60	20%	134	46%	294	60	20%
SER	203	71%	49	17%	35	12%	287	154	54%
SMountain	126	60%	49	19%	43	21%	209	94	45%
RURAL SUBTOTAL	712	51%	309	22%	366	26%	1.387	495	36%
ONAL SUBTUTAL	/12	31%	308	2270	300	2070	1,307	490	30%
STATEWIDE	3,277	53%	1.300	21%	1.551	25%	6.128	2,400	39%

^{**} For persons receiving 2 visits within the first 14 days of service.

NOTE: Percentages should NOT total 100% across the LME row.

	7 Days of C	are or Less	9 20 Da	ys of Care	20 265 D	ays of Care	Greater ti	nan 1 Year	Total D	ischarges
	7 Days of C	are or Less	6 - 30 Da	ys or Care	30 - 365 Da	ays or care	Greater tr	ian i rear	Total D	ischarges
LME	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Average LOS (Days)
Cumberland	86	46%	63	34%	36	19%	2	1%	187	50.5
Durham	181	49%	146	39%	46	12%	0	0%	373	17.8
Guilford	167	44%	145	38%	67	18%	0	0%	379	23.2
Mecklenburg	49	34%	63	44%	30	21%	1	1%	143	28.0
Pathways	30	39%	26	34%	18	23%	3	4%	77	49.2
Wake	661	65%	281	28%	77	8%	2	0%	1,021	21.0
URBAN SUBTOTAL	1,174	54%	724	33%	274	13%	8	0%	2,180	24.8
ACR	163	57%	89	31%	36	13%	0	0%	288	17.7
BC	54	52%	30	29%	19	18%	1	1%	104	30.1
Beacon Ctr	128	45%	127	45%	22	8%	5	2%	282	24.3
CenterPoint	163	57%	92	32%	31	11%	2	1%	288	22.1
Crossroads	60	44%	47	35%	28	21%	0	0%	135	21.2
Eastpointe	104	45%	98	42%	26	11%	4	2%	232	40.8
ECBH	146	45%	133	41%	43	13%	3	1%	325	25.4
OC	72	55%	52	39%	7	5%	1	1%	132	19.9
OPC	98	54%	56	31%	27	15%	2	1%	183	20.8
Piedmont	124	48%	82	32%	54	21%	0	0%	260	23.5
Sandhills	118	50%	89	37%	29	12%	2	1%	238	40.9
SEC	132	56%	86	36%	17	7%	2	1%	237	29.3
WHighlands	164	48%	104	30%	76	22%	1	0%	345	29.7
MIXED SUBTOTAL	1,526	50%	1,085	36%	415	14%	23	1%	3,049	26.7
Albemarle	47	55%	29	34%	9	10%	1	1%	86	28.3
Five County	160	59%	81	30%	26	10%	3	1%	270	23.2
Foothills	38	54%	17	24%	13	19%	2	3%	70	42.3
Johnston	56	56%	31	31%	11	11%	2	2%	100	41.3
SER	56	39%	63	44%	22	15%	1	1%	142	30.6
SMountain	70	46%	54	35%	28	18%	1	1%	153	22.4
RURAL SUBTOTAL	427	52%	275	33%	109	13%	10	1%	821	28.7
STATEWIDE	3.127	52%	2.084	34%	798	13%	41	1%	6.050	26.3

SOURCE: Healthcare Enterprise Accounts Receivable Tracking System (HEARTS) Data on Discharges during September 1, 2007 - March 31, 2008.

INDICATOR 5: State Psychiatric Hospital Readmissions									
LME	Readmitted wit Disch	thin 30 Days of narge	Readmitted wit	Total					
	Number	Percent	Number	Percent	Discharges				
Cumberland	14	12%	25	21%	117				
Durham	31	15%	73	36%	202				
Guilford	19	10%	44	23%	188				
Mecklenburg	5	7%	14	20%	70				
Pathways	3	4%	8	12%	67				
Wake	53	10%	128	25%	505				
URBAN SUBTOTAL	125	11%	292	25%	1,149				
ACR	18	9%	41	21%	192				
BC	7	11%	14	21%	66				
Beacon Ctr	23	12%	59	32%	186				
CenterPoint	16	9%	43	25%	171				
Crossroads	8	12%	18	26%	69				
Eastpointe	21	12%	46	27%	173				
ECBH	12	10%	25	21%	117				
OC	8	11%	13	17%	75				
OPC	10	14%	24	35%	69				
Piedmont	9	6%	22	16%	141				
Sandhills	7	6%	23	18%	127				
SEC	7	5%	20	14%	140				
WHighlands	20	10%	50	25%	203				
MIXED SUBTOTAL	166	10%	398	23%	1,729				
Albemarle	2	5%	6	15%	41				
Five County	16	11%	30	21%	145				
Foothills	3	6%	8	15%	52				
Johnston	4	7%	10	19%	54				
SER	8	10%	22	27%	83				
SMountain	6	7%	16	18%	88				
RURAL SUBTOTAL	39	8%	92	20%	463				
STATEWIDE	330	10%	782	23%	3,341				

SOURCE: Healthcare Enterprise Accounts Receivable Tracking System (HEARTS) Data on Discharges during July 1 - Sep

otember 30, 2007.

LME	Seen in 1 to 7 days		Seen in 8 to 30 days		Seen in 30 to 60 days		Seen in 61+ days**		Not Seen		Total Number o
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Discharges
Cumberland	4	33%	0	0%	2	17%	4	33%	2	17%	12
Durham	7	23%	5	16%	2	6%	2	6%	15	48%	31
Guilford	12	29%	9	22%	4	10%	2	5%	14	34%	41
Mecklenburg	7	23%	1	3%	2	7%	0	0%	20	67%	30
Pathways	7	24%	6	21%	2	7%	0	0%	14	48%	29
Nake	1	8%	2	17%	3	25%	1	8%	5	42%	12
URBAN SUBTOTAL	38	25%	23	15%	15	10%	9	6%	70	45%	155
ACR	10	18%	6	11%	2	4%	1	2%	37	66%	56
3C	5	16%	3	9%	0	0%	1	3%	23	72%	32
Beacon Ctr	8	14%	3	5%	4	7%	3	5%	39	68%	57
CenterPoint	4	13%	5	17%	2	7%	3	10%	16	53%	30
Crossroads	6	55%	1	9%	1	9%	1	9%	2	18%	11
Eastpointe	12	28%	3	7%	1	2%	1	2%	26	60%	43
ECBH	10	16%	9	15%	4	6%	1	2%	38	61%	62
C	4	21%	4	21%	1	5%	3	16%	7	37%	19
OPC	3	18%	3	18%	0	0%	2	12%	9	53%	17
Piedmont*											
Sandhills	7	29%	4	17%	1	4%	2	8%	10	42%	24
SEC	12	20%	15	25%	5	8%	4	7%	25	41%	61
WHighlands	34	21%	14	9%	13	8%	16	10%	87	53%	164
MIXED SUBTOTAL	115	20%	70	12%	34	6%	38	7%	319	55%	576
Albemarle	14	25%	7	13%	4	7%	3	5%	28	50%	56
Five County	13	17%	10	13%	5	6%	3	4%	47	60%	78
Foothills	2	15%	3	23%	0	0%	1	8%	7	54%	13
Johnston	0	0%	1	50%	0	0%	0	0%	1	50%	2
SER	5	25%	2	10%	1	5%	1	5%	11	55%	20
SMountain	17	24%	2	3%	2	3%	4	6%	45	64%	70
RURAL SUBTOTAL	51	21%	25	10%	12	5%	12	5%	139	58%	239
			I				H				I

SOURCE: Healthcare Enterprise Accounts Receivable Tracking System (HEARTS) Discharge Data (for HEARTS discharges July 1 - September 30, 2007); Medicaid and State Service Claims Data (for claims submitted July 1, 2007 - March 31, 2008).

*Data on service claims for Piedmont are not available for this report.

*This group ranged from 61-164 days.

NOTES: The rows may add up to > 100% due to rounding.

The data has been lagged two quarters (6 months) to allow adequate time for claims to be submitted and the data to be captured by the paid claims system.

LME	Seen in '	Seen in 1 to 7 days		Seen in 8 to 30 days		Seen in 30 to 60 days		Seen in 61+ days**		Not Seen	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Discharges
Cumberland	33	30%	16	14%	3	3%	8	7%	51	46%	111
Durham	89	43%	14	7%	19	9%	9	4%	75	36%	206
Guilford	65	35%	27	15%	12	6%	9	5%	73	39%	186
Mecklenburg	17	26%	10	15%	4	6%	3	5%	31	48%	65
Pathways	22	39%	8	14%	2	4%	6	11%	18	32%	56
Wake	114	24%	101	21%	21	4%	27	6%	222	46%	485
URBAN SUBTOTAL	340	31%	176	16%	61	6%	62	6%	470	42%	1,109
ACR	60	32%	20	11%	11	6%	8	4%	89	47%	188
BC	27	40%	10	15%	5	7%	4	6%	21	31%	67
Beacon Ctr	46	24%	26	13%	10	5%	13	7%	99	51%	194
CenterPoint	46	27%	36	21%	12	7%	12	7%	65	38%	171
Crossroads	31	46%	16	24%	0	0%	0	0%	20	30%	67
Eastpointe	60	35%	23	13%	6	4%	9	5%	73	43%	171
ECBH	27	23%	18	16%	8	7%	3	3%	59	51%	115
OC	31	43%	12	17%	3	4%	4	6%	22	31%	72
OPC	27	45%	5	8%	4	7%	2	3%	22	37%	60
Piedmont*											
Sandhills	45	38%	20	17%	4	3%	5	4%	44	37%	118
SEC	38	28%	21	16%	10	7%	4	3%	61	46%	134
WHighlands	73	34%	28	13%	11	5%	12	6%	90	42%	214
MIXED SUBTOTAL	511	33%	235	15%	84	5%	76	5%	665	42%	1,571
Albemarle	11	31%	6	17%	1	3%	3	8%	15	42%	36
Five County	55	38%	16	11%	10	7%	6	4%	58	40%	145
Foothills	22	37%	11	18%	3	5%	3	5%	21	35%	60
Johnston	15	26%	17	29%	5	9%	5	9%	16	28%	58
SER	47	55%	14	16%	6	7%	3	4%	15	18%	85
SMountain	23	29%	14	18%	9	11%	7	9%	27	34%	80
RURAL SUBTOTAL	173	37%	78	17%	34	7%	27	6%	152	33%	464
STATEWIDE	1.024	33%	489	16%	179	6%	165	5%	1.287	41%	3.144

SOURCE: Healthcare Enterprise Accounts Receivable Tracking System (HEARTS) Discharge Data (for HEARTS discharges July 1 - September 30, 2007); Medicaid and State Service Claims Data (for claims submitted July 1, 2007 - March 31, 2008).

**Data on service claims for Piedmont are not available for this report.

**This group ranged from 61-173 days.

NOTES: The rows may add up to > 100% due to rounding.

The data has been lagged two quarters (6 months) to allow adequate time for claims to be submitted and the data to be captured by the paid claims system.

INDICATOR 7: Child Services in Non-Family Settings								
LME	Children Receiv Trea	Total Number of Childrer Served with MH or SA						
	Number	Percent	Diagnosis**					
Cumberland	113	5%	2,340					
Durham	69	3%	2,743					
Guilford	151	6%	2,541					
Mecklenburg	143	3%	4,323					
Pathways	161	5%	3,098					
Wake	195	5%	4,066					
URBAN SUBTOTAL	832	4%	19,111					
ACR	95	7%	1,449					
BC	77	5%	1,682					
Beacon Ctr	125	6%	2,183					
CenterPoint	127	5%	2,624					
Crossroads	50	5%	1,087					
Eastpointe	77	3%	2,566					
ECBH	197	4%	5,233					
OC	55	5%	1,166					
OPC	36	3%	1,120					
Piedmont*								
Sandhills	191	5%	3,865					
SEC	111	4%	2,509					
WHighlands	159	5%	3,437					
MIXED SUBTOTAL	1,300	4%	28,921					
Albemarle	55	3%	1,627					
Five County	51	3%	1,995					
Foothills	39	4%	903					
Johnston	54	6%	838					
SER	74	3%	2,389					
SMountain	113	3%	4,053					
RURAL SUBTOTAL	386	3%	11,805					
STATEWIDE	2,464	4%	59,837					

SOURCE: Medicaid and State Service Claims Data. October 1 - December 31, 2007 (first service received)

^{*} Data on service claims for Piedmont are not available for this report.

^{**} The number of children served includes those with co-occurring developmental disabilities.

	Appendi	x C							
SoHow Did We Do?									
Progress Indicator	SFY 2008 Performance Standard	SFY 2008 Target	State Average	Range Among LMEs	Urban LMEs Average	Mix LMEs Average	Rural LMEs Average	Your LME	
1. Timely Access to Care									
❖ Emergent	100%	100%	99%	82% - 100%	98%	100%	100%		
❖ Urgent	80%	88%	79%	42% - 100%	88%	77%	70%		
❖Routine	63%	69%	66%	26% - 88%	72%	60%	71%		
2. Services to Persons in Need									
❖Adult Mental Health	38%	38%	39%	22% - 62%	34%	39%	50%		
❖Child/Adolescent Mental Health	38%	38%	45%	27% - 77%	38%	47%	56%		
❖Adult Developmental Disabilities	36%	36%	37%	22% - 54%	33%	38%	41%		
❖Child/Adolescent Developmental Disability	19%	19%	19%	11% - 34%	18%	21%	20%		
❖Adult Substance Abuse	8%	10%	7%	4% - 11%	7%	7%	9%		
❖Adolescent Substance Abuse	7%	9%	6%	4% - 10%	6%	7%	6%		
3. Timely Initiation & Engagement in Service									
❖Mental Health: 2 Visits within 14 Days	35%	42%	38%	24% - 54%	38%	38%	37%		
❖Mental Health: 2 Additional Visits within Next 30 Days	21%	25%	26%	13% - 42%	27%	25%	24%		
❖Developmental Disabilities: 2 Visits within 14 Days	60%	72%	70%	39% - 100%	69%	70%	69%		
❖Developmental Disabilities: 2 Additional Visits within Next 30 Days	46%	55%	59%	25% - 100%	58%	60%	56%		
❖Substance Abuse: 2 Visits within 14 Days	59%	71%	64%	43% - 82%	67%	65%	58%		
❖Substance Abuse: 2 Additional Visits within Next 30 Days	42%	50%	50%	31% - 65%	54%	49%	44%		
❖Mental Health/Developmental Disability: 2 Visits within 14 Days	NA	NA	58%	29% - 88%	52%	63%	58%		
❖Mental Health/Developmental Disability: 2 Additional Visits within Next 30 Days	NA	NA	48%	18% - 74%	40%	52%	51%		
❖Mental Health/Substance Abuse: 2 Visits within 14 Days	NA	NA	53%	34% - 71%	51%	57%	51%		
❖Mental Health/Substance Abuse: 2 Additional Visits within Next 30 Days	NA	NA	39%	20% - 62%	38%	42%	36%		
4. Effective Use of State Psychiatric Hospitals									
❖1-7 Days of Care	55%	44%	52%	34% - 65%	54%	50%	52%		
❖8-30 Days of Care	NA	NA	34%	24% - 45%	33%	36%	33%		
5. State Psychiatric Hospital Readmissions									
❖Readmitted within 30 Days	9%	8%	10%	4% - 15%	11%	10%	8%		
❖Readmitted within 180 Days	18%	16%	23%	12% - 36%	25%	23%	20%		
6. Timely Follow-up After Inpatient Care									
❖ADATCs: Seen in 1-7 Days	24%	36%	21%	0% - 55%	25%	20%	21%		
❖State Psychiatric Hospitals: Seen in 1-7 Days	28%	42%	33%	23% - 55%	31%	33%	37%		
7. Child Services in Non-Family Settings	6%	5%	4%	3% - 7%	4%	4%	3%		

LMES STRAceases Unit or through an LMES provider who are determined to need the release in the provider who are determined to need the release in the provider who are determined to need the release in the provider who are determined to need the release in the provider who are determined to need the release in the provider who are determined to need the release in the provider who are send to the provider in t		on of Measures in the Community Systems Progre		
LMEs STRAccess bits or through an LMEs provider who are determined to need the release access is defined as provider who are determined to need the release access is defined provider on the release access is defined provider on the release access is defined provider on the release access is defined as provider who are determined to need the release access is defined as provider who are determined to need the release access is defined as provider who are determined to need the release access is defined as provider who are defined provider. The provider is mediated by release the provider is mediated by receive a found in the LME cardinent street. A release access is defined as a few release and the LME cardinent street. A release access is defined as a few release and the LME cardinent street. A release access is defined as a few release access in the release access is defined as a few release and the LME cardinent street. A release access is defined as a few release and the LME cardinent street. A release access is defined as a few release access in the release access is defined as a few relation to the LME cardinent street. A release access is defined as a few relation to the LME cardinent street. A release access is defined as a few relation to the LME cardinent street. A release access is defined as a few relation to the LME cardinent street. A release access is defined as a few relation to the LME cardinent street. A relation to the LME cardinent street is related to the cardinate proof and the LME cardinent street. A relation to the LME cardinent street is related to the cardinate proof and the cardinate street and possible to the disability group we street in the year. Persons with a few paid IPRS and/or before a disability access and the cardinate street and possible for the disability group we main 14 days of the first service dains of the disability group (scholars dauly) disposed commands and possible to the disability group (scholars dauly) disposed commands and possible to the disability group (sc				
prevalence) maid IPRS and/or Medicaid service claim' that midicates a diagnosis for the age-disability group during the defined period. Disability group during the defined period. Disability group during the defined period. Disability group with the first three diagnoses on all claims. Persons in the IRR and age after service in the Persons in the IRR and Dir. (e.g., were counsed in all applicable columns. Timely Initiation of Services	Timely Access to Care	LME's STR/Access Unit or through an LME's provider who are determined to need the relevant level of care (emergent, urgent, or routine) and who receive it within the timeframes specified in Clinical	LME's STR/Access Unit or through an LME's provider who are determined to need the relevant level of care (emergent, urgent or routine), during	consumer is available to receive care. This indicator will rely on LMEs' quarterly reports, until the DHHS ensures that the screening data submitted to the Client Data Warehouse (CDW) is complete and
Medicaid service chaim* that indicates a diagnosis for the disability group during the defined period who receive a second paid IPRS and/or Medicaid service chaim that indicates a diagnosis for the disability group within 14 days of the first service date Engagement in Services Number of persons meeting the criteria for Initiation who receive a fourth paid IPRS and/or Medicaid service chaim* that indicates a diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service date Engagement in Services Number of persons meeting the criteria for Initiation who receive a fourth paid IPRS and/or Medicaid service chaim* that indicates a diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service date consumers) within 30 days of the second service date such diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service date such diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service date such diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service date such diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service date such diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service dates with more diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service dates with more diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days after disability group (excludes dually diagnosed consumers) within 30 days after disability group (excludes dually diagnosed consumers) within 30 days after disability group (excludes dually diagnosed consumers) within 30 days after disability group (excludes dually diagnosed demaged of the disability group (excludes dually diagnosed consumers) during the defined		paid IPRS and/or Medicaid service claim* that indicates a diagnosis for the age-disability group during the defined period. Disability group is based on the first three diagnoses on all claims. Persons in each disability group were counted once based on the LME and age at first service in the year. Persons with multiple disabilities (e.g. MH and SA, MH and DD, etc.) were counted in all applicable	relevant age group estimated to need service for the disability (based on national studies). Age appropriate estimates were applied to county	An individual person can be counted in more than one age-disability group Defined period includes four quarters of service dates, lagged by one quarter prior to the report to allow time for claims to be submitted and paid.
who receive a fourth paid IPRS and/or Medicaid service claim* that indicates a diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service date Medicaid service claim* that indicates a diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service date Effective Use of State Psychiatric Hospitals (Short Term Use) State Psychiatric Hospitals Readmissions Number of persons discharged from a state psychiatric hospital during the defined period who were admitted no more than 7 or between 8-30 days prior to discharge Number of persons discharged from a state psychiatric hospital during the defined period who had a subsequent readmission to a state psychiatric hospital during the defined period who had a subsequent readmission to a state psychiatric hospital during the defined period who had a subsequent readmission to a state psychiatric hospital during the defined period who had a subsequent readmission to a state psychiatric hospital during the defined period who had a paid PRS and/or Medicaid service* within 1-7 or 8-30 calendar days of the discharge Timely Follow-Up After Inpatient Care - State Alcohol & Drug Abuse Treatment Centers (ADATCs) Timely Follow-Up After Inpatient Care - State Psychiatric hospital during the defined period who had a paid IPRS and/or Medicaid service* within 1-7 or 8-30 calendar days of the discharge Timely Follow-Up After Inpatient Care - State Psychiatric hospital during the defined period who had a paid IPRS and/or Medicaid service* within 1-7 or 8-30 calendar days of the discharge drom a state psychiatric hospital during the defined period who had a paid IPRS and/or Medicaid service* within 1-7 or 8-30 calendar days of the discharge drom a state psychiatric hospital during the defined period who had a paid IPRS and/or Medicaid service* within 1-7 or 8-30 calendar days of the discharge drom a state psychiatric hospital during the defined period who had a paid IPRS and/or Medicaid	Timely Initiation of Services	Medicaid service claim* that indicates a diagnosis for the disability group during the defined period who receive a second paid IPRS and/or Medicaid service claim that indicates a diagnosis for the disability group within 14 days of the first service	Medicaid service claim* that indicates a diagnosis	Defined period includes first service dates during one quarter plus two subsequent quarters of additional service dates (most recent 3 quarters of service claims total). Lagging first service dates by two quarters prior to the report allows time for
Posphiatric hospital during the defined period who were admitted no more than 7 or between 8-30 days prior to discharge	Engagement in Services	who receive a fourth paid IPRS and/or Medicaid service claim* that indicates a diagnosis for the disability group (excludes dually diagnosed consumers) within 30 days of the second service	Medicaid service claim* that indicates a diagnosis for the disability group (excludes dually diagnosed	Defined period includes first service dates within one quarter plus two subsequent quarters of service dates (most recent 3 quarters of service claims total). Lagging first service dates by two quarters prior to the report allows time for claims to be submitted and paid.
Psychiatric hospital during the defined period who had a subsequent readmission to a state psychiatric hospital during the defined period, hospital within 30 or 180 calendar days of the discharge Timely Follow-Up After Inpatient Care - State Alcohol & Drug Abuse Treatment Centers (ADATCs)		psychiatric hospital during the defined period who were admitted no more than 7 or between 8-30 days	psychiatric hospital during the defined period,	Defined period includes discharges during the most recent two quarters prior to the report. NOTE: This is HEARTS data in the Client Data Warehouse (CDW).
Care - State Alcohol & Drug Abuse Treatment Centers (ADATCs) and/or Medicaid service* within 1-7 or 8-30 calendar days of the discharge Timely Follow-Up After Inpatient Care - State Psychiatric Hospitals Timely Follow-Up After Inpatient Care - State Psychiatric Hospitals To reatment Centers (ADATCs) Number of persons discharged from a state psychiatric hospital during the defined period who had a paid IPRS and/or Medicaid service* within 1-7 or 8-30 calendar days of the discharge Child Services in Non-Family Settings Number of children ages 0-17 with a MH and/or SA diagnosis who had a paid IPRS and/or Medicaid claim* for Level III, or Level IV during the defined period, according to HEARTS data in the Client Data Warehouse (CDW). Number of persons discharged from a state psychiatric hospital during the defined period, according to HEARTS data in the Client Data Warehouse (CDW). Defined period includes discharges during a quality and paid. Number of children ages 0-17 with a MH and/or SA diagnosis who had a paid IPRS and/or Medicaid claim* for Level III, or Level IV Defined period, according to HEARTS data in the Client Data Warehouse (CDW). In the Client Data Warehouse (CDW). Number of children ages 0-17 with a MH and/or SA diagnosis who had a paid IPRS and/or Medicaid claim* for Level III, or Level IV Defined period, according to HEARTS data in the Client Data Warehouse (CDW). Defined period includes discharges during the defined period, according to HEARTS data in the Client Data Warehouse (CDW). Defined period includes discharges during the defined period, according to HEARTS data in the Client Data Warehouse (CDW). Service dates during the 3 quarters prior to the report, Lag allows time for claims to be submit and paid. Number of children ages 0-17 with a MH and/or SA diagnosis who had a paid IPRS and/or Medicaid claim* for Level III, or Level IV	-	psychiatric hospital during the defined period who had a subsequent readmission to a state psychiatric hospital within 30 or 180 calendar days of the	psychiatric hospital during the defined period,	Defined period includes discharges during a quarter, lagged 6 months to allow for readmissions up to 180 days after discharge. NOTE: This is HEARTS data in the Client Data Warehouse (CDW).
Care - State Psychiatric Hospitals psychiatric hospital during the defined period who had a paid IPRS and/or Medicaid service* within 1- 7 or 8-30 calendar days of the discharge Child Services in Non-Family Settings Number of children ages 0-17 with a MH and/or SA diagnosis who had a paid IPRS and/or Medicaid claim* for Level III, or Level IV Defined period, according to HEARTS data in the Client Data warehouse (CDW). Number of children ages 0-17 with a MH and/or SA diagnosis who had a paid IPRS and/or Medicaid claim* for Level III, or Level IV Defined period, according to HEARTS data in the Client Data warehouse (CDW). Defined period includes one quarter of service dates, lagged by one quarter prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the 3 quarters prior to the report, and first service dates during the defined period, according to HEARTS data in the Client Data service dates during the defined period, according to HEARTS data in the Client Data service dates during the defined period, according to HEARTS data in the Client Data service dates during the defined period, according to HEARTS data in the Client Data service dates during the defined period, according to HEARTS data in the Client Data service	Care - State Alcohol & Drug Abuse	during the defined period who had a paid IPRS and/or Medicaid service* within 1-7 or 8-30	during the defined period, according to HEARTS	service dates during the 3 quarters prior to the report. Lag allows time for claims to be submitted
Settings diagnosis who had a paid IPRS and/or Medicaid claim* for Level II-Program, Level III, or Level IV service* during the defined period. dates, lagged by one quarter prior to the report allow time for claims to be submitted and paid		psychiatric hospital during the defined period who had a paid IPRS and/or Medicaid service* within 1-	psychiatric hospital during the defined period, according to HEARTS data in the Client Data	service dates during the 3 quarters prior to the report. Lag allows time for claims to be submitted
	·	diagnosis who had a paid IPRS and/or Medicaid claim* for Level II-Program, Level III, or Level IV	diagnosis who had a paid IPRS and/or Medicaid	Defined period includes one quarter of service dates, lagged by one quarter prior to the report to allow time for claims to be submitted and paid.

^{*}Service claims data include:

- (1) All paid IPRS claims and claims denied due to lack of funds. (Other denied IPRS claims and procedure codes YP500 and YP692 are excluded.)
 (2) All Medicaid claims billed by the following providers:

All enhanced services

CAP-MR/DD

Directly-enrolled residential

Professional practitioners (licensed psychologists, LCSWs, etc.)

Psychiatrists

Psychiatric residential treatment facilities (excluding state-operated)

Criterion 5 extended-stay residential placements
Community Intermediate Care Facilities for Mental Retardation

General hospital inpatient psychiatric units

Select general hospital outpatient

Community psychiatric hospitals (excluding state-operated)